FORM 1	STATEMENT OF			2010			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS					
LAST NAME FIRST NAME MIDDLE NA KIELLY MICHAEL MAILING ADDRESS!	η,	FOR OFFIC USE ONLY	_				
Box 548			ID Code				
CITY: 2  CAPTIVA FIN 38  NAME OF OFFICE OR POSITION HELD OF CAPTIVA COM MUNITY	PR SOUGHT:	membre)	No. Conf. Code P. Req. Code	*11JUN27m09\$55NE			
You are not limited to the space on the lines of CHECK ONLY IF CANDIDATE OR			<del>7.</del> 50 F				
THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):  DECEMBER 31, 2010  OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  MANNER OF CALCULATING REPORTABLE INTERESTS:  THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see Instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCOME. (If you have nothing to report,	ME [Major sources of income to the you must write "none" or "n/a")						
NAME OF SOURCE OF INCOME	ADD	RCE'S RESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
( See avai	elel Sheet ]						
	<del> </del>						
BUSINESS ENTITY OF BUSINESS' INCOME C			RESS PRINCIPAL BUSINESS				
LIONE							
PART C REAL PROPERTY [Land, building (If you have nothing to report, you have nothing to report nothing	-	FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.					
SOUTH SEA CAPTIVA,		INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.					
	7 7 7 33721		THER FOI	RMS you may need cribed on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]							
(If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
! 							
			<u> </u>				
			<del></del>				
PART E — LIABILITIES [Major debts] (If you have nothing to report, you must write "none" or "n/a")							
NAME OF CREDITOR  None		ADDRESS OF CREDITOR					
100100				· · · · · · · · · · · · · · · · · · ·			
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]  (If you have nothing to report, you must write "none" or "n/a")  BUSINESS ENTITY # 1 BUSINESS ENTITY # 2 BUSINESS ENTITY # 3							
NAME OF BUOMIEGO ENTITY							
NAME OF BUSINESS ENTITY	Nne			<del> </del>			
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required):  DATE SIGNED (required):  6 (2 2 11)							
FILING INSTRUCTIONS:							
WHAT TO EU E.							

# WHAL TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

## NOTE:

### **MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

initially, each local officer/employee, stat officer, and specified state employee mu file within 30 days of the date of his or he appointment or of the beginning of emplor ment. Appointees who must be confirmed to the Senate must file prior to confirmation, eve if that is less than 30 days from the date of the appointment.

Candidates for publicly-elected local office must file at the same time they file the qualifying papers.

Thereafter, local officers/employees, sta officers, and specified state employees a required to file by July 1st following ea calendar year in which they hold their potions.

Finally, at the end of office or employment each local officer/employee, state officer, a specified state employee is required to file final disclosure form (Form 1F) within 60 da of leaving office or employment.

.